

BEST AVAILABLE COPY

CLAIMS ONLY						Application Number 10 728 710		Filing Date					
						Applicant(s)							
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	1						51						
2		1					52						
3		1					53						
4		1					54						
5		3					55						
6		3					56						
7		3					57						
8		3					58						
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18	1						68						
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22		3					72						
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45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	2						Total Indep						
Total Depend	47						Total Depend						
Total Claims	49						Total Claims						